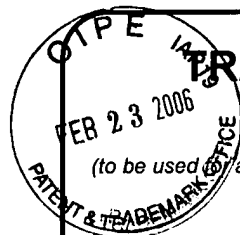


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Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/809,562
		Filing Date	March 14, 2001
		First Named Inventor	Hillel Hendler
		Group Art Unit	2663
		Examiner Name	Ng, Christine Y.
Total Number of Pages in This Submission	19	Attorney Docket Number	353600.01901

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Post Card
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John W. Carpenter (Reg. No. 39,129) Reed Smith LLP
Signature	
Date	20 Feb '06

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, US Patent & Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, on 2/24/2006	
Typed or printed name	Mary Kelley
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OTPE
FEE TRANSMITTAL
for FY 2005
Effective 10/01/2004. Patent fees are subject to annual revision.
☒ Applicant claims small entity status. See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT (\$) 0.

Complete if Known

Application Number	09/809,562
Filing Date	March 14, 2001
First Named Inventor	Hillel Hendler
Examiner Name	Ng, Christine Y.
Art Unit	2663
Attorney Docket No.	353600.01901

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 50-2603

Deposit Account Name: REED SMITH LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	790	Utility filing fee	
		1002	350	Design filing fee	
		1003	550	Plant filing fee	
		1004	790	Reissue filing fee	
		1005	200	Provisional filing fee	
SUBTOTAL (1)					(\$) 0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims: 28 29** = 0 X .25 =

Independent Claims: 5 5** = 0 X 100. =

Multiple Dependent: X 360. = 0

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1202	50	Claims in excess of 20	
		1201	200	Independent claims in excess of 3	
		1203	360	Multiple dependent claim, if not paid	
		1204	200	** Reissue independent claims over original patent	
		1205	50	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					0.

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1051	130	Surcharge - late filing fee or oath	
		1052	50	Surcharge - late provisional filing fee or cover sheet.	
		1053	130	Non-English specification	
		1812	2,520	For filing a request for reexamination	
		1804	920*	Requesting publication of SIR prior to Examiner action	
		1805	1,840*	Requesting publication of SIR after Examiner action	
		1251	120	Extension for reply within first month	
		1252	450	Extension for reply within second month	
		1253	1020	Extension for reply within third month	
		1254	1,590	Extension for reply within fourth month	
		1255	2,160	Extension for reply within fifth month	
		1401	500	Notice of Appeal	
		1402	500	Filing a brief in support of an appeal	
		1403	1,000	Request for oral hearing	
		1451	1,510	Petition to institute a public use proceeding	
		1452	500	Petition to revive - unavoidable	
		1453	1,500	Petition to revive - unintentional	
		1501	1,400	Utility issue fee (or reissue)	
		1502	800	Design issue fee	
		1503	1,100	Plant issue fee	
		1460	130	Petitions to the Commissioner	
		1807	50	Processing fee under 37 CFR 1.17 (q)	
		1806	180	Submission of Information Disclosure Stmt	
		8021	40	Recording each patent assignment per property (times number of properties)	
		1809	790	Filing a submission after final rejection (37 CFR § 1.129(a))	
		1810	790	For each additional invention to be examined (37 CFR § 1.129(b))	
		1801	790	Request for Continued Examination (RCE)	
		1802	900	Request for expedited examination of a design application	
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid					SUBTOTAL (3) (\$) 0.

SUBMITTED BY

Name (Print/Type)	John W. Carpenter	Registration No. (Attorney/Agent)	39,129	Telephone	415-659-5927
Signature				Date	20 Feb 06

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